

07-19-04

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**TRANSMITTAL  
FORM**(To be used for all correspondence  
after initial filing)

Application Number	10/698,024
Filing Date	October 29, 2003
First Named Inventor	Jin Mu Wu
Art Unit	2131
Examiner Name	
Attorney Docket No.	430151.401

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> CD(s), Number of CD(s) _____
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC ( <i>Appeal Notice, Brief, Reply Brief</i> )
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	<u>Supplemental Application Data</u>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	<u>Sheet</u>
<input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Individual Name	Ellen M. Bierman	Customer Number <b>00500</b>
Signature	<i>Ellen M. Bierman</i>	
Date	July 15, 2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	***SENT VIA EXPRESS MAIL***	
Signature		Date:

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
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**SUPPLEMENTAL APPLICATION DATA SHEET**

**Application Information**

Application number:: 10/698,024  
Filing Date:: 10/29/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?:: No  
Number of copies of CRF::  
Title :: DATA ENCRYPTION METHOD  
Attorney Docket Number:: 430151.401  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 6  
Small Entity?::  
Petition included?:: No  
Petition Type::  
Licensed U.S. Gov't Agency::  
Contract or Grant No::  
Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: People's Republic of China  
Status:: Full Capacity  
Given Name:: Jin  
Middle Name:: Mu  
Family Name:: Wu  
Name Suffix::  
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State or Province of Residence::  
Country of Residence:: People's Republic of China  
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State or Province of mailing address::  
Country of mailing address:: People's Republic of China  
Postal or Zip Code of mailing address:: ~~300130~~300131

**Correspondence Information**

Correspondence Customer Number :: **00500**

**Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Malaysia	PI 20024037	10/29/02	Yes

**Assignee Information**

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Country of mailing address::	Malaysia
Postal or Zip Code of mailing address::	55200

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